FOR INSTRUCTIONS, SEE BACK OF FORM		[]	FORM	
	THICS AND] [DR-2	DISCLOSURE
DISCLOSURE SUMMARY PAGE	48		Rev. 02/96)	REPORT
2010 . 11 11	20 AH 9: 48	Fo	oeeU ealito	<u> </u>
COMMITTEE NAME (Must be some as on Statement of Omanization	ed l			
Larke Chenty Depublic	an William	1 1		*
IMPORTANT: Indicate type of committee you are reporting for:		1 1		
(1)Statewide/Logislative Candidate (2)Statewide PAC (3)State Party (4)Co	unty/Local Candidate	Co	mputar	
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Control (8) Support State of Candidatos	Committee			
(a) Support state of Campingues				
SIGNATURE OF TREASURER (or porson filing this report)	TELEPHONE		DATE S	SIGNED
Penalties Due For Late Filed Re	ports Range from	\$10 to \$	3400	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOL	LOWING SENTENC	Æ:		
I AM FILING A TO (report date)	ORT FOR AN/A (1) EL II	ECTION /(2 Idicate one	D) D	TION YEAR.
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter C	ate of Election
☐ Check if this is final (termination) report and attach Notice of Dissolution (You must continue to file reports until a Notice of Dissolution		County & L which Elect		os, enter County in
STATEMENT OF	CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (This is the of all monios hold by the committee. This amount MUST be same as the cash on hand at the end of the last reporting period or must be zero if this is first roport filed.)	the	2	391	4.1
ADD TOTAL MONEY TAKEN IN THIS PERIOD				A 11
Schedule A: Cash Contributions total (Attach Schedule A).			355	1
Schedule C: Fund-raising Events total (Attach Schedule C)				
Schedule F: Leans Received total (Attach Schedule F)	,,,	•	· · · · · · · · · · · · · · · · · · ·	
Schedule H: Total Sales of Campaign Property (Attach Sch	edule H1		···	
(Schedulo H applies to Candidates' Committees				
Jacinada II applies to annualities deministrate		TAL\$	746.	61
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		•	100 44	
Schedule B: Expenditures total (Attach Schedule B)	1462 1680 1997 977 977 977 978 168 168 168		197	600
Schedule F: Loan Repayments total (Altach Schedule F)				
CASH ON HAND at the end of this reporting period (if final report, be be zero) (Altach DR-3)	lance must	\$,	549	- 0/
UNPAID BILLS (From Schedule D - Attach Schedule D)	44 52 64 96 60 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).				
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)				<u> </u>
CANDIDATE COMMITTEES ONLY:		•		
CONCIN TARY DOEAVOOWN (Schodula G Attached?)			YI	ES <u>J</u> NO

SCHEDULE

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds) (Rev. 02/		PTS
	CHECK THIS BO MENDING FOR	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STAIL PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWALT THICS AND CAMPAIGN.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
1/21/	1011	membership Class		
2010	CK#	y care		\$ 75 CK
4/./	ID#	inembership duce		313
4/19/2016	CK#	" " CARICA!	,	\$715 °C
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	CK#			
	ID#			
	CK#			
			SUB-TOTAL	255
		TOTAL (if last page	ge of this schedule)	\$355 = 355 = 35

w requires condidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column

Page	of
	(for Schedule A)

FOR INSTRUCTIONS, SEE MANUAL

EXPENDITURES -	MONEY SPENT
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B	MONETARY EXPENDITURES
For office use	only

	= " = " = " = " MONE! GFEN!		
		For office	iso only
COMMITTE	E NAME (Must be same as on Statement of Organization)		
Clar	Ke County Republican Wo	men	
	٠		
DATE EXPENDED	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE	AMOUNT
-/	rayuray Nallan to Scholow	Scholamhy	IXPENDED
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1/2/	Flacuery) (M) ARE	Functal	1.2
2/	(Wicala La	Flacerers)	1 5/4 25
12016			77/

1	.l			
47'-9	Flacered	() (V) 815 La	(Cila, de	27/2016
19740	SUB-TOTAL			<u> </u>

TOTAL (If last page of this schedule)

CPG-20571/140-0040/(Rev. 1991)

Page _ .. _ of ..___ (for Schedule B)